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T-271 P.13/14 F-753

JUN 01 2005

AMENDMENT TRANSMITTAL LETTER				Docket No. MXI-211	
Application No. 10/073644-Conf. #6293		Filing Date February 11, 2002		Examiner M. A. Belyavsky	
Applicant(s): Debra HUDSON et al.					
Invention: HUMAN MONOCLONAL ANTIBODIES TO FC ALPHA RECEPTOR (CD89)					
TO THE COMMISSIONER FOR PATENTS					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	30	- 20 =		x	
Independent Claims	6	- 3 =		x	
Multiple Dependent Claims (check if applicable) <input checked="" type="checkbox"/>					360.00
Other fee (please specify): Notice of appeal					500.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					860.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity					
<input type="checkbox"/> No additional fee is required for this amendment.					
<input checked="" type="checkbox"/> Please charge Deposit Account No. <u>12-0080</u> in the amount of \$ <u>860.00</u> . A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>12-0080</u> as described below.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
<u>Jeanne M. DiGiorgio</u> Jeanne M. DiGiorgio Attorney Reg. No.: 41710				Dated: <u>June 1, 2005</u>	
LAHIVE & COCKFIELD, LLP 28 State Street Boston, Massachusetts 02109 (617) 227-7400					
I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no (703) 872-9306 at MS AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.					
Dated: June 1, 2005		Signature: <u>Jeanne M. DiGiorgio</u> (Jeanne M. DiGiorgio)			

PTO/SB/97 (08-04)
Approved for use through 07/31/2008. OMB 0891-0031
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Application No. (if known): 10/073644

Attorney Docket No.: MXI-211

Certificate of Transmission under 37 CFR 1.8

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on June 1, 2005
Date


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Jeanne M. DiGiorgio

Typed or printed name of person signing Certificate

41,710
Registration Number, if applicable

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Fee Transmittal (1 page)
Notice of Appeal (1 page)
Amendment After Final Action (37 C.F.R. Section 1.116) (4 pages)
Amendment Transmittal (1 page)
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FAX TRANSMISSION

DATE: June 1, 2005

PTO IDENTIFIER: Application Number 10/073644-Conf. #6293
Patent Number

Inventor: Debra HUDSON et al.

MESSAGE TO: US Patent and Trademark Office

FAX NUMBER: (703) 872-9306

FROM: LAHIVE & COCKFIELD, LLP

Jill R. Gorny

PHONE: (617) 227-7400

Attorney Dkt. #: MXI-211

PAGES (Including Cover Sheet): 14

CONTENTS: Fee Transmittal (1 page, in duplicate)
Notice of Appeal (1 page)
Amendment After Final Action (37 C.F.R. Section 1.116) (8 pages)
Amendment Transmittal (1 page)
Charge \$860.00 to deposit account 12-0080
Certificate of Transmission (1 page)

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PTO/USB/17 (12-04v2)
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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

Complete If Known	
Application Number	10/073644-Conf. #8293
Filing Date	February 11, 2002
First Named Inventor	Debra HUDSON
Examiner Name	M. A. Belyavskyi
Art Unit	1644
Attorney Docket No.	MXI-211

TOTAL AMOUNT OF PAYMENT (\$) 860.00

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 12-0080 Deposit Account Name: Lahive & Cockfield, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
- 20 =	x	=		360.00		360.00
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)			
- 3 =	x	=				

3. APPLICATION SIZE FEE

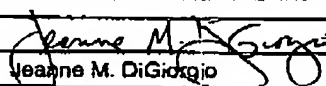
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/50	(round up to a whole number) x	=	


4. OTHER FEE(S)

	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge), 1401 Notice of appeal	500.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	41,710	Telephone	(617) 227-7400
Name (Print/Type)	Jeanne M. DiGiorgio	Date	June 1, 2005		

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PTO/SB/31 (04-05)

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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) MXI-211	
In re Application of Debra HUDSON <i>et al.</i>			
Application Number 10/073844-Conf. #6293		Filed February 11, 2002	
For HUMAN MONOCLONAL ANTIBODIES TO FC ALPHA RECEPTOR (CD89)			
Art Unit 1644		Examiner M. A. Belyavskiy	

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.

The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) \$ 500.00

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is \$ _____

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 12-0080. I have enclosed a duplicate copy of this sheet.

☐ A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.

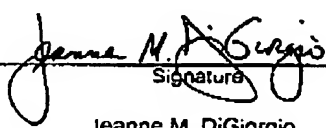
I am the

☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

☒ attorney or agent of record.
Registration number 41.710

☐ attorney or agent acting under 37 CFR 1.34.
Registration number if acting under 37 CFR 1.34 _____


Signature
Jeanne M. DiGiorgio
Typed or printed name
(617) 227-7400
Telephone number
June 1, 2005
Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of 1 forms are submitted.

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Dated: June 1, 2005

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(Jeanne M. DiGiorgio)

06/03/2005 AWONDAF1 00000008 10073644

01 FC:1401

500.00 DA

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01 FC:1401 500.00 DA